

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TR	15	1/15/01
RESPONSE FORMALITY REVIEW	M.H.	JC947 (67)	03-06-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	Original
1	J ✓
2	J ✓
3	J ✓
4	J ✓
5	J ✓
6	J ✓
7	J ✓
8	J ✓
9	J ✓
10	O 0
11	C 0
12	O 0
13	J ✓
14	J ✓
15	J ✓
16	J ✓
17	J ✓
18	✓ J
19	J J
20	J J
21	J J
22	J J
23	J J
24	J ✓
25	O O
26	O O
27	O O
28	J J
29	J J
30	J ✓
31	J J
32	J J
33	J J
34	J J
35	J J
36	J J
37	J ✓
38	J ✓
39	J ✓
40	J ✓
41	J ✓
42	J ✓
43	J ✓
44	J ✓
45	J ✓
46	J ✓
47	J ✓
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions
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